

## External Program Review Committee (EPRC) minutes

**Date of meeting:** October 1, 2020

**DSD liaison:** Stacie Enders, Linda Wolford and Ari Dionisopoulos

**Type:** Whole committee

**Location:** Remote only due to the COVID-19 health pandemic

**Attendees:** Kim Frost, Tatiana Kerestesh, Melanie Eidsmoe, Stacy Danov, Stephanie Schaefer, Susie Haben, Laura Daire, Jodi Greenstein, Mary Piggott, Liz Harri, Danielle Bishop

**Not present:** Dan Baker, Lindsay Nash, Mike Boston

### Agenda items

#### Public comments

There were no public comments during the meeting.

#### Vote

Those in favor of approving the September 2020 meeting minutes:

- Kim Frost: yes
- Tatiana Kerestesh: yes
- Melanie Eidsmoe: yes
- Stacy Danov: yes
- Stephanie Schaefer: yes
- Susie Haben: yes
- Laura Daire: yes
- Jodi Greenstein: yes
- Mary Piggott: yes
- Liz Harri: Not present for vote
- Danielle Bishop: Not present for vote

#### Discussion

- The Requests for Approval Subcommittee would like to see more weather-related proactive positive support strategies in care plans that staff members can implement to reduce the possibility of behaviors during seasonal changes or bad weather.
- The committee discussed possibly developing a list of medication questions providers can take with them to appointments, so they can help advocate for the person.
  - A manual was developed by DHS staff in 2014 that included a question list like this, but it was never published. Perhaps DHS should start working on it again. It was focused specifically on psychotropic meds, but it would be helpful to expand it to include all types of medications.

- Liz has another resource that might be helpful for the manual, related to reviewing functional behavior assessments. She will share that if it is decided to start working on the manual again.
- Tatiana, Danielle, Mary, Stacy and Liz are interested in working on this project. Most of the original authors are now retired.
- Ari will investigate why it was never published.
- Several members have noticed a need for this information.
- There have been recent conversations about clarification on when to report PRN usage to DHS and how DHS can help prevent chemical restraint, which could possibly be new sections added to the manual.
- It might be helpful to providers if we develop a checklist on what information they should bring to appointments.
  - The what's working/not working person-centered tool could be helpful for this.
  - It also helps if providers bring data on things like sleep patterns, how often PRNs are used and the person's reactions, etc.
- It would be helpful to clarify whose responsibility is it to determine what data to collect on medications – the provider's or the doctor's responsibility.
- There are tools available for assessing and tracking changes related to medications – perhaps providers just need to know about these documents and need reminders to complete and bring them to appointments.
- Sometimes providers need additional training on what to watch for.
- In the manual we should be clear about what is required in rule/statute, and what is just meant to be helpful.
- It might help to change the manual from a long document to a webpage format so 1) we can update individual pieces more easily and 2) break up the information into smaller sections so it is easier to navigate. However, DHS may not have enough staff at this time to develop that type of resource.
- Ari will share more information on this topic with the committee in November.
- The committee discussed resources on the [DHS Positive Supports webpage](#) to help caregivers provide trauma-informed supports.
  - Stacy is working on some resources for this and can share more at our next meeting.
  - A good place to start might be: <https://mnpsp.org/trauma-informed-approaches/>.
  - We can also talk to the behavioral health division, to learn about what resources they are sharing with providers.
  - Linda will gather some resources and share at our next meeting.
  - The committee will think about this over the next couple months and then add some resources to the webpage.
- The committee briefly reviewed the types of intervention services available to people in Minnesota.
- The committee will incorporate the following Collaborative Safety concepts into EPRC case reviews:
  - All perspectives are valid
  - Avoid blame/assume good intentions
  - Analyze the system, as well as the incident

- The committee did not know of any new problems or questions people had related to Covid-19 and the [Positive Supports Rule, Minn. R. 9544](#).
- The committee discussed the Positive Support Transition Plan (PSTP) and quarterly review example Stacy and Kim are putting together.
  - The primary audiences are qualified professionals, other provider employees, people receiving services and care teams. The documents should contain technical language to encourage accuracy and effectiveness, as well as plain language examples to help with understanding of technical terms. It is the service provider's responsibility to explain the plan to the person in a way they understand. It is inadvisable to create multiple versions of templates and examples because accessibility and plain language modifications vary greatly since people's needs and understanding can be very different. The provider's will know the person best and are legally responsible for explaining all parts of care plans (not just PSTPs) to people in a way they can understand.
  - It may help to add instructions for care teams on core responsibilities to the manual.
  - Since the examples Stacy and Kim put together are somewhat long and will take a good chunk of time to review, Liz and Mary will review them before they are sent to the whole committee. Hopefully that will save other members some time.
  - Stacy and Kim will share their experiences for the provider presentation we are putting together on the new PSTP.
  - Stacy will ask Danielle to input reasons for medication into the example.
  - It might help to take the examples out of the manual, DHS form 6810C, and just hyperlink to them instead. The manual is already very long and the examples will only add to the length. It makes sense to post them next to the templates on our DHS Positive Supports webpage – hopefully more people will see them there and will be more likely to look at them. Moving them would also make it easier to do future updates. Stacie will ask Charles if he foresees and problems with doing that.